	Type	L #	Hits	Search Text	DBs	Time Stamp	Comments	Error Definition	Errors
1	BRS	L1	43	melagatran	USPAT; EPO; JPO; DERWENT	2005/07/07 16:07			
2	BRS	L2	184282	inflammat$3 or antiinflammatory	US-PGPUB; USPAT; EPO; JPO; DERWENT	2005/07/07 16:09			
3	BRS	L3	5	1 same 2	US-PGPUB; USPAT; EPO; JPO; DERWENT	2005/07/07 16:10			
4	BRS	L4	12	1 same prodrug	US-PGPUB; USPAT; EPO; JPO; DERWENT	2005/07/07 16:11			
5	BRS	L5	14372	thrombus	US-PGPUB; USPAT; EPO; JPO; DERWENT	2005/07/07 16:11			
6	BRS	L6	2	3 same 5	US-PGPUB; USPAT; EPO; JPO; DERWENT	2005/07/07 16:11			
7	BRS	L7	27	kirk adj ian.in.	USPAT; EPO; JPO; DERWENT	2005/07/07 16:13			
8	BRS	L8	2	1 and 7	USPAT; EPO; JPO; DERWENT	2005/07/07 16:13			

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FILE 'MEDLINE' ENTERED AT 16:16:50 ON 07 JUL 2005

FILE 'CAPLUS' ENTERED AT 16:16:50 ON 07 JUL 2005
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FILE 'AGRICOLA' ENTERED AT 16:16:50 ON 07 JUL 2005

=> s melagatran
L1         1217 MELAGATRAN

=> s inflammat? or antiinflammat?
L2      1381145 INFLAMMAT? OR ANTIINFLAMMAT?

=> s l1 (p) l2
L3           18 L1 (P) L2

=> duplicate remove l3
DUPLICATE PREFERENCE IS 'MEDLINE, CAPLUS, BIOSIS, EMBASE, SCISEARCH'
KEEP DUPLICATES FROM MORE THAN ONE FILE?  Y/(N):n
PROCESSING COMPLETED FOR L3
L4            8 DUPLICATE REMOVE L3 (10 DUPLICATES REMOVED)

=> d l4 1-8 ibib abs

L4   ANSWER 1 OF 8     MEDLINE on STN                     DUPLICATE 1
ACCESSION NUMBER:    2005169882     MEDLINE
DOCUMENT NUMBER:     PubMed ID: 15801685
TITLE:               The role of the innate immunity in islet transplantation.
AUTHOR:              Moberg Lisa
CORPORATE SOURCE:    Department of Oncology, Radiology and Clinical Immunology,
                     Uppsala University Hospital, Sweden..
                     lisa.moberg@klinimm.uu.se
SOURCE:              Upsala journal of medical sciences, (2005) 110 (1) 17-55.
                     Ref: 143
                     Journal code: 0332203. ISSN: 0300-9734.
PUB. COUNTRY:        Sweden
DOCUMENT TYPE:       Journal; Article; (JOURNAL ARTICLE)
                     General Review; (REVIEW)
LANGUAGE:            English
FILE SEGMENT:        Priority Journals
ENTRY MONTH:         200506
ENTRY DATE:          Entered STN: 20050402
                     Last Updated on STN: 20050629
                     Entered Medline: 20050628
AB   Clinical islet transplantation is an emerging procedure to cure type 1
     diabetes.  The graft is implanted by infusion into the liver through the
     portal vein.  A major obstacle that still needs to be overcome is the
     requirement for islets from multiple donors to achieve insulin
     independence.  An innate   ***inflammatory***   reaction, the IBMIR, is
     elicited when islets are exposed to blood.  The IBMIR has been described
     as a clotting reaction culminating in disruption of islet morphology and
     is a plausible cause for loss of tissue during the early post-transplant
     period.  In this thesis, the underlying mechanisms of the IBMIR were
     characterized.  The IBMIR was for the first time demonstrated in patients
     undergoing an islet transplant, and a number of clinically applicable
     strategies to limit this reaction were identified.  The thrombin inhibitor
       ***melagatran***   completely blocked the IBMIR in an in vitro tubing
     blood loop system, indicating that thrombin is the driving force in the
     reaction.  Interestingly, islets were shown to produce and secrete tissue
     factor (TF), the physiological trigger of coagulation.  Inactivated FVIIa,
     a specific inhibitor of TF, successfully blocked initiation of the IBMIR.
     An alternative approach to limit the IBMIR was to pre-treat islets in
     culture prior to transplantation.  Nicotinamide added to the culture
     medium effectively decreased the level of TF in human islets.
     Infiltration of immune cells, also a part of the IBMIR, was characterized
     in detail.  The predominant cell types infiltrating the islets were
     neutrophilic granulocytes and, to a lesser degree, monocytes.  Both cell
     types may exert direct cytotoxic effects, and the antigen-presenting
     monocytes may also be important for directing the specific immune system
     to the site of   ***inflammation***  .  These findings have provided new
     insight into the nature of the IBMIR and offer several new strategies to
     improve the outcome of clinical islet transplantation.

L4   ANSWER 2 OF 8  BIOSIS  COPYRIGHT (c) 2005 The Thomson Corporation  on STN
ACCESSION NUMBER:   2004:137675  BIOSIS
DOCUMENT NUMBER:    PREV200400140005
TITLE:              Use of melagatran.
AUTHOR(S):          Kirk, Ian [Inventor, Reprint Author]
CORPORATE SOURCE:   Leicester, UK
                    ASSIGNEE: AstraZeneca AB, Sodertalje, Sweden
PATENT INFORMATION: US 6683054 20040127
SOURCE:             Official Gazette of the United States Patent and Trademark
                    Office Patents, (Jan 27 2004) Vol. 1278, No. 4.
                    http://www.uspto.gov/web/menu/patdata.html. e-file.
                    ISSN: 0098-1133 (ISSN print).
DOCUMENT TYPE:      Patent
LANGUAGE:           English
ENTRY DATE:         Entered STN: 10 Mar 2004
                    Last Updated on STN: 10 Mar 2004
AB   According to the invention there is provided the use of   ***melagatran***
     , or a pharmaceutically acceptable derivative or prodrug thereof, in the
     manufacture of a medicament for the treatment of   ***inflammation***  .

L4   ANSWER 3 OF 8    MEDLINE on STN                      DUPLICATE 2
ACCESSION NUMBER:   2002298505    MEDLINE
DOCUMENT NUMBER:    PubMed ID: 12031965
TITLE:              Inhibition of thrombin abrogates the instant blood-mediated
                      ***inflammatory***   reaction triggered by isolated human
                    islets: possible application of the thrombin inhibitor
                      ***melagatran***   in clinical islet transplantation.
AUTHOR:             Ozmen Lisa; Ekdahl Kristina Nilsson; Elgue Graciela;
                    Larsson Rolf; Korsgren Olle; Nilsson Bo
CORPORATE SOURCE:   Department of Radiology, Oncology and Clinical Immunology,
                    Division of Clinical Immunology, the Rudbeck Laboratory,
                    University Hospital, Uppsala, Sweden.
SOURCE:             Diabetes, (2002 Jun) 51 (6) 1779-84.
                    Journal code: 0372763. ISSN: 0012-1797.
PUB. COUNTRY:       United States
DOCUMENT TYPE:      Journal; Article; (JOURNAL ARTICLE)
LANGUAGE:           English
FILE SEGMENT:       Abridged Index Medicus Journals; Priority Journals
ENTRY MONTH:        200206
ENTRY DATE:         Entered STN: 20020602
                    Last Updated on STN: 20020625
                    Entered Medline: 20020624
AB   A thrombotic/  ***inflammatory***   reaction is elicited when isolated
     islets of Langerhans come in contact with ABO-compatible blood.  The
     detrimental effects of this instant blood-mediated   ***inflammatory***
     reaction (IBMIR) provide a reasonable explanation for the observation that
     an unexpectedly high number of islets, from several donors, are needed to
     produce normoglycemia in transplant patients with type 1 diabetes.  In
     this study, the hypothesis that a specific thrombin inhibitor,
       ***Melagatran***  , could reduce IBMIR in an in vitro model in which human
     islets are exposed to ABO-compatible blood was tested.  The administration
     of   ***Melagatran***   abrogated IBMIR dose-dependently.  Islets exposed
     to blood, in the absence or presence of 0.4 micromol/l   ***Melagatran***
     , exhibited a loss of integrity and were found to be trapped in
     macroscopic clots containing platelets and CD11b(+) leukocytes.  At
     concentrations from 1 to 10 micromol/l,   ***Melagatran***   inhibited
     both coagulation and complement activation.  Also, platelet and leukocyte
     activation and consumption were decreased.  Islet morphology was
     maintained with almost no platelets adhering to the surface, and
     infiltration by CD11b(+) leukocytes was considerably reduced.  In
     conclusion,   ***Melagatran***   significantly reduced IBMIR in this model
     system.  This protective effect indicates that thrombin plays a pivotal
     role in IBMIR and suggests that thrombin inhibition can improve the
     outcome of clinical islet transplantation.

L4   ANSWER 4 OF 8     MEDLINE on STN                  DUPLICATE 3
ACCESSION NUMBER:    2002170282     MEDLINE
DOCUMENT NUMBER:     PubMed ID: 11901897
TITLE:               [The best of 2001. Clinical pharmacology].
                     L'essentiel de 2001 en pharmacologie clinique.
AUTHOR:              Ambrosi P; Gayet J L; Andrejak M
CORPORATE SOURCE:    Service de pharmacologie clinique, CHU Sud, 80054 Amiens.
SOURCE:              Archives des maladies du coeur et des vaisseaux, (2002 Jan)
                     95 Spec No 1 (5 Spec 1) 33-8.  Ref: 21
                     Journal code: 0406011. ISSN: 0003-9683.
PUB. COUNTRY:        France
DOCUMENT TYPE:       Journal; Article; (JOURNAL ARTICLE)
                     General Review; (REVIEW)
                     (REVIEW, TUTORIAL)
LANGUAGE:            French
FILE SEGMENT:        Priority Journals
ENTRY MONTH:         200210
ENTRY DATE:          Entered STN: 20020321
                     Last Updated on STN: 20021010
                     Entered Medline: 20021008
AB   In the field of cardiovascular pharmacology the year 2001 has been marked
     by the demonstration of the clinical significance of new anti-thrombotics
     and by the interesting results with anti-endothelins.  Whereas the failure
     of oral antiGPIIb-IIIa has been confirmed,   ***melagatran***   (an
     anti-thrombin administered orally) and pentasaccharide (a new subcutaneous
     anti-Xa) have proved their efficacy in the prevention of venous
     thromboembolic disease compared to low molecular weight heparins, with an
     acceptable incidence of unwanted effects.  Anti-endothelins under
     development have variable mechanisms of action from one drug to another.
     Their efficacy in cardiac insufficiency, pulmonary artery hypertension and
     arterial hypertension is suggested by clinical studies investigating small
     population; a more important study in decompensated cardiac insufficiency
     has not however shown a reduction of the morbidity and mortality with one
     of these drugs.  The clinical significance of angiotensin II receptor
     antagonists has been confirmed for the indications which they share with
     ACE inhibitors (cardiac insufficiency, prevention of diabetic
     nephropathy).  However, there are not enough comparative trials for these
     indications between these two classes in order to draw conclusions about
     the equivalence or superiority of one or the other.  Of help elsewhere has
     been a re-interpretation of the mode of action of arterial wall drugs, and
     the   ***inflammatory***   theory of atherosclerosis, putting the accent
     for example on the reduction of C reactive protein with a statin, or on
     the anti-   ***inflammatory***   effect of aspirin.  However, one study has
     not shown any benefit in giving a short course of corticosteroids in
     unstable angina.  A very prominent event in the year 2001 remains the
     withdrawal of cerivstatin due to fatal rhabdomyolysis.  The consequences
     go far beyond this drug, as its withdrawal justifies a fresh examination
     of the risk-benefit ratio for all the statins, with the probable corollary
     of a halt in the escalation of prescriptions.  In this context, the new
     ezetimibe-type cholesterol absorption inhibitors could be a future
     solution.

L4   ANSWER 5 OF 8  BIOSIS  COPYRIGHT (c) 2005 The Thomson Corporation  on STN
ACCESSION NUMBER:    2002:151700  BIOSIS
DOCUMENT NUMBER:     PREV200200151700
TITLE:               The effect of the oral direct thrombin inhibitor
                     ximelagatran on the pharmacokinetics of P450-metabolized
                     drugs, in healthy male volunteers.
AUTHOR(S):           Eriksson-Lepkowska, Maria [Reprint author]; Thuresson,
                     Anneli [Reprint author]; Johansson, Susanne [Reprint
                     author]; Larsson, Marita [Reprint author]; Frison, Lars
                     [Reprint author]; Bylock, Anders [Reprint author];
                     Eriksson, Ulf G. [Reprint author]
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CORPORATE SOURCE: AstraZeneca R and D, Molndal, Sweden
SOURCE: Blood, (November 16, 2001) Vol. 98, No. 11 Part 2, pp. 89b. print.
Meeting Info.: 43rd Annual Meeting of the American Society of Hematology, Part 2. Orlando, Florida, USA. December 07-11, 2001. American Society of Hematology.
CODEN: BLOOAW. ISSN: 0006-4971.
DOCUMENT TYPE: Conference; (Meeting)
Conference; Abstract; (Meeting Abstract)
LANGUAGE: English
ENTRY DATE: Entered STN: 21 Feb 2002
Last Updated on STN: 26 Feb 2002

AB Introduction: Ximelagatran (Xi; pINN, formerly H376/95), a novel, oral direct thrombin inhibitor, is converted rapidly to its active form, melagatran (Mel). Diazepam, nifedipine and diclofenac are metabolized by the P450 isoenzymes CYP2C19, CYP3A4 and CYP2C9, respectively, and were used as model compounds to study the effect of Xi on drugs metabolized by these isoenzymes, as shown by any changes in their PK properties upon coadministration with Xi. Methods: Three open-label, randomized studies were conducted in healthy male subjects aged 20-40 years. The nifedipine (n=34) and diclofenac (n=24) studies were three-treatment, three-period crossover studies, in which Treatment I was a single 24 mg tablet of Xi, Treatment III, a single 60 mg tablet of nifedipine or a single 50 mg tablet of diclofenac, depending on the study, and Treatment II was I and III in combination. The diazepam study (n=24) was a two-way crossover study in which Treatment I was a single iv infusion of diazepam (0.1 mg/kg over 10 min) and Treatment II was 24 mg of Xi administered orally bid for 8 days, with a single iv dose of diazepam (0.1 mg/kg over 10 min) on Day 3. Venous blood samples for the determination of plasma concentrations of all compounds were collected frequently in all studies. Confidence intervals (CI; 90%) of 0.8-1.25 and 0.7-1.43 for between-treatment ratios of AUC and Cmax, respectively, indicated bioequivalence between treatments. Results: The estimated ratios and 90% CIs of the AUC and Cmax of diazepam, its metabolite, N-desmethyldiazepam, nifedipine and diclofenac for administration of diazepam, nifedipine and diclofenac in combination with Xi vs alone show that Xi has no clinically significant effect upon the PK properties of diazepam, N-desmethyldiazepam, nifedipine or diclofenac. The PK properties of Mel also did not differ significantly whether Xi was administered alone or with diazepam, nifedipine or diclofenac. Conclusions: There were no clinically relevant drug-drug interactions between ximelagatran and either diazepam, nifedipine or diclofenac. It can be deduced that ximelagatran is not metabolized by CYP2C19, CYP3A4 or CYP2C9. Hence, oral treatment with ximelagatran is not expected to alter the metabolism of other drugs mediated by these isoenzymes. Likewise, the PK of melagatran is not expected to be altered by the coadministration of CYP2C19, CYP3A4 or CYP2C9 substrates or by inhibitors of these enzymes.

L4 ANSWER 6 OF 8 BIOSIS COPYRIGHT (c) 2005 The Thomson Corporation on STN
ACCESSION NUMBER: 2002:129628 BIOSIS
DOCUMENT NUMBER: PREV200200129628
TITLE: A combination of a thrombin inhibitor and dexamethasone prevents the development of experimental disseminated intravascular coagulation in rats.
AUTHOR(S): Elg, Margareta [Reprint author]; Humphries, Bob [Reprint author]; Carlsson, Stefan [Reprint author]; Gustafsson, David [Reprint author]
CORPORATE SOURCE: Integrative Pharmacology, AstraZeneca R and D, Molndal, Sweden
SOURCE: Blood, (November 16, 2001) Vol. 98, No. 11 Part 1, pp. 47a. print.
Meeting Info.: 43rd Annual Meeting of the American Society of Hematology, Part 1. Orlando, Florida, USA. December 07-11, 2001. American Society of Hematology.
CODEN: BLOOAW. ISSN: 0006-4971.
DOCUMENT TYPE: Conference; (Meeting)
Conference; Abstract; (Meeting Abstract)
Conference; (Meeting Poster)
LANGUAGE: English
ENTRY DATE: Entered STN: 6 Feb 2002
Last Updated on STN: 26 Feb 2002

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AB   Introduction: Disseminated intravascular coagulation (DIC) is a systemic
     thrombohemorrhagic disorder seen in association with clinical situations
     such as infection, trauma and obstetric complications.  DIC is
     characterized by excessive thrombin generation, widespread platelet
     aggregation and fibrin deposition followed by consumption of platelets,
     coagulation factors and inhibitors.  The aim of this study was to evaluate
     the efficacy of anticoagulant and anti-  ***inflammatory***   drugs on
     fibrinogen and platelet consumption and fibrin deposition in an
     experimental endotoxinemia rat model.  Methods: In this model, DIC was
     induced by an intravenous (iv) injection of endotoxin (1 mg/kg) and an
     injection of 1251-fibrinogen was used as a tracer for fibrinogen and
     fibrin measurements.  The drugs tested were:   ***melagatran***   (0.32,
     1.0 or 3.2 mumol/kg/h), the active form of the oral direct thrombin
     inhibitor ximelagatran (pINN, formerly H 376/95), unfractionated heparin
     (25 or 50 U/kg/h, AR-C69931MX (0.066 or 0.132 mumol/kg/h), a selective
     platelet ADP receptor (P2T) antagonist; and dexamethasone 1 or 10 mg/kg).
     High and low doses of each agent were tested alone and in combination with
       ***melagatran***   0.32 or 1.0 mumol/kg/h.   ***Melagatran***   , heparin
     and AR-C69931MX were given as a bolus iv injection, followed by continuous
     infusion throughout the experiment starting 20 min before the
     administration of endotoxin.  Dexamethasone was given as a bolus iv
     injection 1 h before the administration of endotoxin.  Fibrinogen and
     platelet levels in the blood were measured as markers of coagulation
     activation, and fibrin deposition in the organs was used as a marker for
     organ damage.  Results: Fibrinogen consumption was partially or completely
     reduced by   ***melagatran***   , dexamethasone and heparin and was further
     protected by   ***melagatran***   in combination with dexamethasone.
     Platelet consumption was partially reduced by all four agents but complete
     protection was only observed with   ***melagatran***   in combination with
     dexamethasone.  Fibrin deposition was almost prevented by all
     anticoagulants and this effect was further enhanced by   ***melagatran***
     in combination with dexamethasone, heparin or AR-C69931MX.  Conclusion:
       ***Melagatran***   in combination with dexamethasone provided protection
     from the consequences of activated hemostasis in this experimental DIC rat
     model.

L4   ANSWER 7 OF 8  CAPLUS  COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER:         2000:493401  CAPLUS
DOCUMENT NUMBER:          133:99559
TITLE:                    New use of melagatran
INVENTOR(S):              Kirk, Ian
PATENT ASSIGNEE(S):       Astrazeneca AB, Swed.
SOURCE:                   PCT Int. Appl., 22 pp.
                          CODEN: PIXXD2
DOCUMENT TYPE:            Patent
LANGUAGE:                 English
FAMILY ACC. NUM. COUNT:   1
PATENT INFORMATION:

     PATENT NO.          KIND   DATE          APPLICATION NO.         DATE
     ---------------     ----   --------      --------------------    --------
     WO 2000041716        A1    20000720      WO 2000-SE51            20000113
         W:  AE, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR, CU,
             CZ, DE, DK, DM, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL,
             IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA,
             MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI,
             SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM,
             AZ, BY, KG, KZ, MD, RU, TJ, TM
         RW: GH, GM, KE, LS, MW, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE,
             DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF,
             CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG
     CA 2356611           AA    20000720      CA 2000-2356611         20000113
     BR 2000007452        A     20011016      BR 2000-7452            20000113
     EP 1150704           A1    20011107      EP 2000-902232          20000113
         R:  AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,
             IE, SI, LT, LV, FI, RO
     JP 2002534477        T2    20021015      JP 2000-593326          20000113
     AU 767077            B2    20031030      AU 2000-23361           20000113
     NZ 512713            A     20041029      NZ 2000-512713          20000113
     US 6683054           B1    20040127      US 2000-508762          20000316
     ZA 2001005275        A     20020926      ZA 2001-5275            20010626
     NO 2001003414        A      20010710    NO 2001-3414           20010710
     US 2004082518        A1     20040429    US 2003-685003         20031015
PRIORITY APPLN. INFO.:                       SE 1999-70          A  19990113
                                             WO 2000-SE51        W  20000113
                                             US 2000-508762      A1 20000316
AB   According to the invention there is provided the use of   ***melagatran***
     , or a pharmaceutically acceptable deriv. or prodrug thereof, in the
     manuf. of a medicament for the treatment of   ***inflammation***   .
       ***Melagatran***   and derivs. thereof are effective for the treatment of
       ***inflammation***   in patients with, or at risk of, a disease in which
     inhibition of thrombin is desired.
REFERENCE COUNT:          2      THERE ARE 2 CITED REFERENCES AVAILABLE FOR THIS
                                 RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L4   ANSWER 8 OF 8     MEDLINE on STN                    DUPLICATE 4
ACCESSION NUMBER:    2001102964      MEDLINE
DOCUMENT NUMBER:     PubMed ID: 11060733
TITLE:               Effects of melagatran, a novel direct thrombin inhibitor,
                     during experimental septic shock.
AUTHOR:              Eriksson M; Basu S; Larsson A; Mattsson C; Eriksson O;
                     Kiiski R; Nordgren A
CORPORATE SOURCE:    Department of Intensive Care, University Hospital of
                     Uppsala, S-751 85 Uppsala, Sweden..
                     Mats.Eriksson@anestesi.uu.se
SOURCE:              Expert opinion on investigational drugs, (2000 May) 9 (5)
                     1129-37.  Ref: 44
                     Journal code: 9434197. ISSN: 1354-3784.
PUB. COUNTRY:        ENGLAND: United Kingdom
DOCUMENT TYPE:       Journal; Article; (JOURNAL ARTICLE)
                     General Review; (REVIEW)
                     (REVIEW, TUTORIAL)
LANGUAGE:            English
FILE SEGMENT:        Priority Journals
ENTRY MONTH:         200101
ENTRY DATE:          Entered STN: 20010322
                     Last Updated on STN: 20010322
                     Entered Medline: 20010126
AB   Sepsis and endotoxaemia initiate the generation of thrombin, which is
     responsible for the conversion of fibrinogen to fibrin, platelet
     aggregation and acts as an   ***inflammatory***   mediator affecting
     numerous types of cells, including myocardial, smooth muscle and
     endothelial cells.  Human Gram-negative septic shock, frequently seen in
     intensive care units, is a condition with high mortality.  This condition
     can be replicated in the endotoxaemic pig.  As many of the toxic effects
     of sepsis are due to thrombin generation, it was of interest to study,
     using this porcine experimental septic shock model, whether inhibition of
     thrombin could alleviate the effects of endotoxaemia.  For this purpose
       ***melagatran***   , a direct synthetic thrombin inhibitor with a molecular
     weight of 429 Da, was employed.    ***Melagatran***   does not
     significantly interact with any other enzymes in the coagulation cascade
     or fibrinolytic enzymes aside from thrombin.  Furthermore,
       ***melagatran***   does not require endogenous co-factors such as
     antithrombin or heparin co-Factor II for its antithrombin effect, which is
     important, as these inhibitors are often consumed in septic patients.  We
     have shown that   ***melagatran***   exerts a beneficial effect on renal
     function, as evaluated by plasma creatinine and urinary output, during
     experimental septic shock.  These effects were most pronounced during the
     later phase of the experimental period, after the infusion of
       ***melagatran***   had been discontinued.  Prevention of intrarenal
     coagulation may be attributable to this finding.  In addition,
       ***melagatran***   had beneficial effects on systemic haemodynamics (left
     ventricular stroke work index, pulmonary capillary wedge pressure and
     systemic vascular resistance index) in endotoxaemic pigs.  This result may
     be explained by the ability of   ***melagatran***   to inhibit thrombin,
     thereby counteracting thrombin's cellular effects.  Thus, it can be seen,
     using this experimental model of septic shock, that   ***melagatran***
     may help to alleviate some of the damaging effects of endotoxaemia,
     although more research is required to test this further.

=> d his
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     (FILE 'HOME' ENTERED AT 16:16:31 ON 07 JUL 2005)

     FILE 'MEDLINE, CAPLUS, BIOSIS, EMBASE, SCISEARCH, AGRICOLA' ENTERED AT
     16:16:50 ON 07 JUL 2005
L1          1217 S MELAGATRAN
L2       1381145 S INFLAMMAT? OR ANTIINFLAMMAT?
L3            18 S L1 (P) L2
L4             8 DUPLICATE REMOVE L3 (10 DUPLICATES REMOVED)

=> s l1 (p) prodrug
L5           102 L1 (P) PRODRUG

=> s l2 (p) l5
L6             2 L2 (P) L5

=> s l4 not l6
L7             6 L4 NOT L6

=> s thrombus
L8         84740 THROMBUS

=> s l4 (p) l8
PROXIMITY OPERATOR LEVEL NOT CONSISTENT WITH
FIELD CODE - 'AND' OPERATOR ASSUMED 'L63 (P) L53'
PROXIMITY OPERATOR LEVEL NOT CONSISTENT WITH
FIELD CODE - 'AND' OPERATOR ASSUMED 'L65 (P) L54'
PROXIMITY OPERATOR LEVEL NOT CONSISTENT WITH
FIELD CODE - 'AND' OPERATOR ASSUMED 'L67 (P) L55'
L9             0 L4 (P) L8

=> s kirk i?/au
L10          300 KIRK I?/AU

=> s l10 and l1
L11            4 L10 AND L1

=> duplicate remove l11
DUPLICATE PREFERENCE IS 'CAPLUS, BIOSIS'
KEEP DUPLICATES FROM MORE THAN ONE FILE?  Y/(N):n
PROCESSING COMPLETED FOR L11
L12            4 DUPLICATE REMOVE L11 (0 DUPLICATES REMOVED)

=> s l12 not l4
L13            2 L12 NOT L4

=> d l13 1-2 ibib abs

L13  ANSWER 1 OF 2  CAPLUS  COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER:         2002:905906  CAPLUS
DOCUMENT NUMBER:          137:380021
TITLE:                    The use of a gatran for the manufacture of a
                          medicament for the treatment of pulmonary fibrosis
INVENTOR(S):                ***Kirk, Ian***
PATENT ASSIGNEE(S):       Astrazeneca Ab, Swed.
SOURCE:                   PCT Int. Appl., 22 pp.
                          CODEN: PIXXD2
DOCUMENT TYPE:            Patent
LANGUAGE:                 English
FAMILY ACC. NUM. COUNT:   1
PATENT INFORMATION:

     PATENT NO.          KIND    DATE        APPLICATION NO.        DATE
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     WO 2002094304        A1     20021128    WO 2002-SE950          20020516
         W:  AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN,
             CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH,
             GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR,
             LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, OM, PH,
             PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TN, TR, TT, TZ,
             UA, UG, US, UZ, VN, YU, ZA, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU,
          TJ, TM
        RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AT, BE, CH,
            CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR,
            BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG
     CA 2446049           AA     20021128   CA 2002-2446049         20020516
     EP 1395277           A1     20040310   EP 2002-733707          20020516
        R:  AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,
            IE, SI, LT, LV, FI, RO, MK, CY, AL, TR
     BR 2002009578        A      20040622   BR 2002-9578            20020516
     JP 2004529962        T2     20040930   JP 2002-591021          20020516
     NZ 529345            A      20050527   NZ 2002-529345          20020516
     US 2004157772        A1     20040812   US 2003-477775          20031114
PRIORITY APPLN. INFO.:                      SE 2001-1762        A   20010518
                                            WO 2002-SE950       W   20020516
OTHER SOURCE(S):         MARPAT 137:380021
AB   According to the invention there is provided the use of a gatran, such as
     inogatran or   ***melagatran***  , or a pharmaceutically-acceptable deriv.
     thereof, for the manuf. of a medicament for the treatment of pulmonary
     fibrosis.  Efficacy of inogatran was studied in bleomycin-induced rats
     lung fibrosis.
REFERENCE COUNT:         4      THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS
                                RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L13  ANSWER 2 OF 2  CAPLUS  COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER:        2001:416776  CAPLUS
DOCUMENT NUMBER:         135:14329
TITLE:                   Antithrombotic pharmaceutical combinations including a
                         P2T receptor antagonist
INVENTOR(S):             Dixon, John; Humphries, Robert; Jarvis, Gavin;
                           ***Kirk, Ian***
PATENT ASSIGNEE(S):      Astrazeneca AB, Swed.
SOURCE:                  PCT Int. Appl., 29 pp.
                         CODEN: PIXXD2
DOCUMENT TYPE:           Patent
LANGUAGE:                English
FAMILY ACC. NUM. COUNT:  1
PATENT INFORMATION:

     PATENT NO.          KIND   DATE        APPLICATION NO.        DATE
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     WO 2001039781        A1     20010607   WO 2000-SE2378          20001129
        W:  AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN,
            CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR,
            HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT,
            LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU,
            SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN,
            YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM
        RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY,
            DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF,
            BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG
     CA 2391161           AA     20010607   CA 2000-2391161         20001129
     BR 2000016043        A      20020723   BR 2000-16043           20001129
     EP 1237559           A1     20020911   EP 2000-982033          20001129
        R:  AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,
            IE, SI, LT, LV, FI, RO, MK, CY, AL, TR
     JP 2003515565        T2     20030507   JP 2001-541513          20001129
     EE 200200271         A      20030616   EE 2002-271             20001129
     NZ 518904            A      20040227   NZ 2000-518904          20001129
     RU 2242232           C2     20041220   RU 2002-117296          20001129
     NZ 530058            A      20050429   NZ 2000-530058          20001129
     ZA 2002003707        A      20030811   ZA 2002-3707            20020509
     NO 2002002606        A      20020711   NO 2002-2606            20020531
     US 2003032618        A1     20030213   US 2002-148526          20020531
PRIORITY APPLN. INFO.:                      SE 1999-4377        A   19991201
                                            WO 2000-SE2378      W   20001129
AB   The invention provides pharmaceutical combinations and their use in
     anti-thrombotic therapy.  The combinations include a P2T receptor
     antagonist and another antithrombotic agent.
REFERENCE COUNT:         7      THERE ARE 7 CITED REFERENCES AVAILABLE FOR THIS
                                RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT
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     (FILE 'HOME' ENTERED AT 16:16:31 ON 07 JUL 2005)

     FILE 'MEDLINE, CAPLUS, BIOSIS, EMBASE, SCISEARCH, AGRICOLA' ENTERED AT
     16:16:50 ON 07 JUL 2005
L1           1217 S MELAGATRAN
L2        1381145 S INFLAMMAT? OR ANTIINFLAMMAT?
L3             18 S L1 (P) L2
L4              8 DUPLICATE REMOVE L3 (10 DUPLICATES REMOVED)
L5            102 S L1 (P) PRODRUG
L6              2 S L2 (P) L5
L7              6 S L4 NOT L6
L8          84740 S THROMBUS
L9              0 S L4 (P) L8
L10           300 S KIRK I?/AU
L11             4 S L10 AND L1
L12             4 DUPLICATE REMOVE L11 (0 DUPLICATES REMOVED)
L13             2 S L12 NOT L4

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COST IN U.S. DOLLARS                                 SINCE FILE      TOTAL
                                                          ENTRY    SESSION
FULL ESTIMATED COST                                       32.01      32.22

DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)           SINCE FILE      TOTAL
                                                          ENTRY    SESSION
CA SUBSCRIBER PRICE                                       -2.19      -2.19

STN INTERNATIONAL LOGOFF AT 16:20:31 ON 07 JUL 2005
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